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## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL030269 US

As a below named inventor	, I hereby declare that:								
My residence, post office a	ddress and citizenship are as s	tated next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
the specification of which (c	check only one item below):								
is attached hereto.									
was filed as United State	es application								
Serial No									
on									
and was amended									
on									
was filed as PCT internal     was filed as PCT internal	ational application								
Number PCT/IB2004/05027	4								
on 17 March 2004()									
l a caracidad conden D	OT Ambiata 40								
and was amended under P	CT Article 19		(if annicable)						
on			(if applicable).						
	eviewed and understand the co amendment referred to above	ntents of the above-identified spec	ification, including the						
I acknowledge the duty to c with Title 37, Code of Fede		aterial to the examination of this ap	plication in accordance						
patent or inventor's certificate the United States of America certificate or any PCT interior	ate or of any PCT international a ca listed below and have identiful national application(s) designated	ed States Code, § 119 of any foreigapplication(s) designating at least of ied below any foreign application(s) ing at least one country other than filing date before that of the application	one country other than  i) for patent or inventor's the United States of						
PRIOR FOREIGN/PCT AP	PLICATION(S) AND ANY PRIC	DRITY CLAIMS UNDER 35 U.S.C.	119:						
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119						
Europe	03100725.5	20 March 2003 YES							

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number (includes Reference to PCT International Applications) PHNL030269 US POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Jack E. Haken, Reg. No. 26,902 Direct Telephone Calls to: (name and telephone number) Michael E. Marion, Reg. 32,266 (914)332-0222 Edward M. Blocker, Reg. No. 30,245 SECOND GIVEN NAME FULL NAME **FAMILY NAME** FIRST GIVEN NAME **LE PHAN** Kim OF **INVENTOR** CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 201 RESIDENCE The Netherlands Vietnam Eindhoven **CITIZENSHIP** STATE & ZIP CODE/COUNTRY POST OFFICE POST OFFICE ADDRESS CITY **ADDRESS** Prof. Holstlaan 6 5656 AA Eindhoven The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201

DATE

14 October 2004

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office (July 1994)

10/549559

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This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Title

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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).									
I hereby appoint:									
Practitioners associated with the Customer Number:				24737					
C OR			L				l 		
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):									
Name		Registration Number	The state of the s		ame		Registration Number		
			TTUTTE						
<b> </b> -					·····				
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).									
		pondence address for the applica	tion identified in	the atta	ched statement un	der 37 Cl	FR 3.73(b) to:		
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The address associated with Customer Number: 24737									
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Assignee	Name and Add	ress:							
,			י קאד.ד.זא	энтт.	TPS ETECT	דאסאי	CS N.V.		
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5621 BA Eindhoven, The Netherlands									
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be									
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.									
SIGNATURE of Assignee of Record									
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee									
Signature / Mellages. Maur					Date 14 January 2005				
Name	Michael E. Marion					Telepho	ne (914)	333-9637	
Title	Author	rized Representa	tive						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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